# Discussion guide for 1st and 3rd semester

### What do you imagine to be especially good in a clinical elective? (STRENGTHS)

- > What criteria do you use to select a place for your first clinical elective?
- What do you wish to learn in your first clinical elective?
- Which practical skills would you like to learn or to perform?
- > What do you wish to have mastered by the end of your first clinical elective by all means?
- ➤ In what way will you learn the most in a clinical elective?

#### What do you imagine to be not so good in a clinical elective? (WEAKNESSES)

- Is there anything you are particularly afraid of in your first elective?
- ➤ What could lead to disappointment with your clinical elective?
- ➤ How would you feel, if you got the impression on your ward that your presence annoys? How would you behave in such a case?
- ➤ In case you make bad experiences during your first clinical elective, e.g. a situation like the one just described, what would this mean for your further clinical electives?
- What would make you quit a clinical elective prematurely?

### How could a clinical elective be improved or, respectively, its learning effectiveness?

- What could you do yourselves to improve clinical electives?
  - Would you prepare for a clinical elective? If yes, how?
  - Should a clinical elective be debriefed? If yes, why? And with whom best?
- ➤ How could a medical faculty / the curriculum foster good learning success of a clinical elective?
  - Should there be opportunities to prepare for a clinical elective? If yes, what kind?
  - Should there be a guideline for electives? If yes, what should be in it?
- ➤ What could the respective ward / the physicians / the nurses / the Practice Year students offer to make the experience of a clinical elective good?
  - Should an elective student have a constant contact person/mentor? Who should this be (Practice Year student, resident, consultant)?
  - What should the supervision by a mentor look like?
  - Should there be little quiz or feedback rounds on the ward?
  - How and by whom should learning objectives be defined?
  - Should there be feedback or an evaluation at the end of a clinical elective?

If there was a preparation for clinical electives, what would it look like and what could be problematic with it?

# Discussion guide for 5th to 11th semester

### What was particularly good during your clinical electives? (STRENGTH)

- Which criteria did you use to select your clinical elective(s)?
- ➤ How was your work on the ward organized? Did you feel welcome? Was there an introduction?
- How was the supervision?
- ➤ What were your learning objectives for the first clinical elective? Were these fulfilled?
- Which practical skill did you learn or did you execute?
- What were the patient contacts or the patient care like?
- ➤ Were there difficult / straining situations? How were they dealt with?
- Was there a particularly good event that you will not forget?
- ➤ How did you learn the most?
- > (only 11th semester: did you feel well prepared for the Practice Year by your clinical electives? If not, what would have had to be been different in the clinical electives?

#### What was not so good during your electives? (WEAKNESSES)

- ➤ What leads mostly to disappointments during a clinical elective according to your opinion?
- ➤ How did negative experiences during your first clinical elective have an influence on you?
- Did you cease a clinical elective prematurely or what would need to happen for you to do so?

# How could a clinical elective be improved or its learning effect be increased, respectively?

- How could you improve clinical electives yourselves?
  - Is it important to prepare for a clinical elective? If yes, how and by what means?
  - Would a reflection after a clinical elective be important? If yes, how and with whom should the reflection take place?
- ➤ How could a medical faculty / the curriculum foster good learning success of a clinical elective?
  - Should there be learning opportunities to prepare for a clinical elective? If yes, what kind?
  - What should a guideline to accompany a clinical elective contain?
  - Should there be feedback in the following semester?
- > What could the respective ward / the physicians do for improvement?
  - Should an elective student have a constant contact person/mentor? Who should this be (Practice Year student, resident, consultant)?
  - What should the supervision by a mentor look like?

- Should there be little quiz or feedback rounds on the ward?
- How and by whom should learning objectives be defined?
- Should there be feedback or an evaluation at the end of a clinical elective?
- > If there was a preparation for clinical electives, what could be problematic with it?